## PART B - FEE(S) TRANSMITTAL

MAY 2 2 2006	or Fax			Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (571) 273-2885			
INSTRUCTIONS: This for appropriate. All further continuities and the indicate and the indic	should be used for tran respondence including the lelow or directed otherwise is.	smitting the ISSU Patent, advance or in Block 1, by (a	IE FEE and PUBLI ders and notification ) specifying a new	CATION FEE (if required in of maintenance fees correspondence address	uired). Blocks 1 through 5 s will be mailed to the current s; and/or (b) indicating a seps	should be completed where correspondence address as arate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE Gerald L. DePardo CiDRA Corporation 50 Barnes Park North Wallingford, CT 06492 5/23/2006 CNGUYEN3 000	E ADDRESS (Note: Use Block 1 for	any change of address)		Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.  Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope			
f FC:1501 2 FC:1504	1400.00 OP 300.00 OP	1400.00 OP			addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.  William J. Barber (Depositor's name)  (Signature)  (Date)		
APPLICATION NO.	FILING DATE	FIRST NAMED INVE		NTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/661,234 09/12/2003 John A. Moon CV-0038A 6836 TITLE OF INVENTION:							
APPLN. TYPE	SMALL ENTITY	ISSUE FI	EE P	UBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	No	\$1,40	0	\$300	\$1,700 <b>-</b>	05/22/2006	
EXAMINER		ART UN	IT C	CLASS-SUBCLASS			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  Tree Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  PRINTED ON THE PATENT (print or type)  (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Please check the appropriate assignee category or categories (will not be printed on the patent):							
☑ Issue Fee ☐ A check in the amount ☐ Publication Fee (No small entity discount permitted) ☐ Payment by credit care					ount of the fee(s) is enclosed.  card. Form PTO-2038 is attached. ereby authorized by charge the required fee(s), or credit any overpayment, to nber (enclose an extra copy of this form).		
5. Change in Entity Status  a. Applicant claims Sh	(from status indicated above MALL ENTITY status. See 2		b. Applicant is n	no longer claiming SMA	LL ENTITY status. See 37 C	FR 1.27(g)(2).	
The Director of the USPTO NOTE: The Issue Fee and Printerest as shown by the reco	is requested to apply the Issu ublication Fee (A required) words of the United States Pale	ne Fee and Publicate vill not be accepted and Trade nark	tion Fee (if any) or to I from any one other Office	o re-apply any previousl than the applicant; a reg	y paid issue fee to the applicatistered attorney or agent; or the	tion identified above. he assignee or other party in	
Authorized Signature	Will,	1 pm	er	Date	5/18/06		
Typed or printed name William J. Barber Registration No. 32,720							
Alexandra, Virginia 22313	1430.			•	the public which is to file (an minutes to complete, includir omments on the amount of tu Trademark Office, U.S. Dep S. SEND TO: Commissioner displays a valid OMB control		